William Mar

COMPLETE IF KNOWN

Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorney Docket Number

First Named Inventor

DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION

(37 CFR 1.63	COMPLETE IF KNOWN										
(0. 011(1100	• •	Application Number									
Declaration Submitted with Initi OR	ial Filing	Filing Date									
Declaration Submitted after Initi	ial Filing (surcharg	ge Group Art Unit									
(37 CFR 1.16(3)) required)	Examiner Name										
As a below named inventor, I here	by declare that	:									
My residence, mailing address, and citizenship are as stated below next to my name.											
I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
VITERBI DECODING DEVICE AND METHOD FOR PROCESSING MULTI-DATA INPUT INTO MULTI-DATA OUTPUT											
the specification of which											
is attached hereto											
OR was filed on	•	asili	nited States Annli	cation Nur	nber or						
was filed onas United States Application Number or PCT International Application Numberand											
was amended on		(if applicable).			X.						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.											
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.											
I hereby claim foreign priority benefit					n(s) for						
patent, inventor=s or plant breeder's	rights certificate	(s), or 365(a) of any PCT	international app	lication wh	ich						
designated at least one country other by checking the box, any foreign app											
application having a filing date before				itemationa							
Prior Foreign Application	Country	Foreign Filing Date	Priority	Certified Copy Attached?							
Number(s)		(MM/DD/YYYY)	Not Claimed	Yes No							
091114690	TAIWAN	07/03/2002		√							
· · · · · · · · · · · · · · · · · · ·											
Additional foreign application pu	mboro ara listad	on a cumplemental priori	ty data shoot PTC	VSB/02B :	ttached						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.											
I hereby claim the benefit under Title listed below:	35, United Stated	Code ' 119(e) of any Ur	itied States provis	ionai appli	cation(s)						
Applicati n Numb r(s)	Filing Dat	e (MM/DD/YYYY)	☐ Additional prov	isional applic	ation						
			numbers are lis priority data she attached hereto	et PTO/SB/0							

DECLARATION - Utility or Design Patent Application

		-				1 14							
										oplication(s), or ' 365(c			
										nd, insofar as the subjer PCT International	CU		
										12, I acknowledge the	lutv		
										leral Regulations ' 1.5			
										CT international filing of			
of this applic		Woolf alo illin	g dato on t	.,	,,,o, app.	oudo.			. .	or mannament and			
U.S Parent Application or PCT Parent						iling	Date	Parent Patent Number					
Number					(MM/DD/YYYY)			(if applicable)					
	-							•					
								·					
.—	**		al applica	atior	number	s are	isted o	on a supple	men	tal priority data sheet			
	SB/02B attache		- 6-W				4: /	-> 4		this and insting and to			
	inventor, I here ousiness in the l								cute	this application and to			
	er No.: 21552								nhar	listed below			
△ Custome	er No.: 21952	OK [] Ke	gisterea p	orac	auonei(s	Halli	erregis	auon nun	iibei	listed below:			
N	ame	Registration	on Numbe	er	 	 :	Name			Registration Number			
		- regional											
·		<u> </u>											
Director all c	orrespondence	to: 🗵 Cust	tomer Nu	mbe	er: 2155 2	2 OR		Correspond	dence	e address below:			
Name				•	· · · · · · · · · · · · · · · · · · ·								
Address		• •						-					
Address					· .	*****	·			. •••••			
City					State		ZIP		•				
Country		Telephone	ĺ	,	·		Fax		,		4		
Name of So	le or First Inve	ntor	:					A petition I	nas b	een filed for this unsig	ned		
					Family Name or Surname								
Given Name (first and middle [if any]) William					Mar								
VVIIIIaiii					IVICI =								
Inventor's	Malling)	M - 5		1	<u> </u>			Date		June 10, 2002			
Signature Residence:	Taipei	1611	State		Country	Tai	wan	Citizensh	in	ROC			
City		- "											
Post Office	8FI., No. 533,	Jungjeng Ro	d., Shindi	an (City, Taip	ei, Ta	aiwan	231, R.O.	C.				
Address													
Post Office Address	1									,			
City	Taipei	State	Zij	D	231			Country	Taiv	wan			
-11,	1			ı.	'					•			
⊠ Additi here) are being na	amed on s	supp	olementa	Addi	tional I	nventor(s)	Shee	et PTO/SB/02A attache	;d		
Hele	IU.												

DECLARATION			ADDITIONAL INVENTOR(S) (Supplemental Sheet)									
Name of Additional Joint Inventor, if any:			☐ A petition has be n filed for this unsigned invento									d inventor
Given Name (first and	middle [if any])	Fan	Family Name or Surname									
Kelven	1	,	Cheng									
Inventor's Signature	Kelve	~ 1	Cheng				Date		10, 2002			
Residence: City	Taipei		State			Co	untry	Taiwan		Citizenship		R.O.C.
Post Office Address	8F1., No. 533, Jung	jeng	g Rd., Shindian City, Taip				iipei, T	aiwan	231, R	RO.C.		
Post Office Address												
City	Taipei	S	tate			ļ	ZIP	231		Country	Tai	wan
Name of Additional Jo	oint Inventor, if any:		☐ A petition has been filed for this unsigned								d inventor	
Given Name (first and	middle [if any])	Fan	nily Na	ame	or Surna	ıme		 -				
					-		-					
Inventor's Signature							Date				~	
Residence: City			State			Со	untry			Citizenshi	р	
Post Office Address												
Post Office Address		-			-,					· · · · · · · · · · · · · · · · · · ·		· ·
City		S	tate	,			ZIP		: :	Country		-
Name of Additional Jo	oint Inventor, if any:		ē			A pe	etition I	nas beei	n filed 1	or this uns	igne	d inventor
Given Name (first and middle [if any]) Family Name or Surname												
Inventor's Signature		1					Date	•				,
Residence: City		 	State	e		Со	untry			Citizenshi	р	
Post Office Address			٠						<u> </u>	-		
Post Office Address				-						 		
City		S	tate				ZIP			Country		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor									d inventor			
Given Name (first and middle [if any]) Family Name or Surname												
Inventor=s Signature					Date				-			
Residence: City			State			Co	Country		<u>ا</u>	Citizenshi	р	
Post Office Address				,	L				,I	- 9		;
Post Office Address												
City		S	tate			\Box	ZIP			Country		: